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| APPLICATION NO.   | FILING DATE  |   | FIRST NAME   | D INVEN                        | OO OP   | AT  | FORNEY DOCKET NO.   | CONFIRMATION NO.  |
| 10/701,045  |  |   |  | FIRST NAMED INVENTOR           |   |   |   |   |
|   | 11/04/2003   |   | Michael G.   |                                |   |   | RTN2-155PUS   | 5518  |
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Approved for use through 07/31/2006. OMB 0651-0031 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE ter the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application Number 10/701,045 TRANSMITTAL Filing Date November 4, 2003 **FORM** First Named Inventor Michael G. Adlerstein Art Unit 2859 **Examiner Name** Stanley J. Pruchnic (to be used for all correspondence after initial filing) Attorney Docket Number Total Number of Pages in This Submission **RTN2-155PUS ENCLOSURES** (Check all that apply) ~ After Allowance Communication to TC Drawing(s) Fee Transmittal Form Fee Attached Licensing-related Papers Appeal Communication to Board of Appeals and Interferences Petition Appeal Communication to TC Amendment/Reply Appeal Notice, Brief, Reply Brief Petition to Convert to a After Final **Provisional Application** Proprietary Information Power of Attorney, Revocation Affidavits/declaration(s) Change of Correspondence Address Status Letter Other Enclosure(s) (please Identify Extension of Time Request Terminal Disclaimer below): **Express Abandonment Request** Return Postcard Request for Refund PTOL-85 Form Information Disclosure Statement CD, Number of CD(s) Certified Copy of Priority Landscape Table on CD Document(s) Reply to Missing Parts/ Remarks Incomplete Application In the event a petition for extension of time is required by this paper and not Reply to Missing Parts under 37 CFR 1.52 or 1.53 otherwise provided, such petition is hereby made and authorization is provided herewith to charge deposit account No. 50-0845 for the cost of such extension. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Name Daly, Crowley, Mofford & Durkee, LLP Signature Printed name Donald F. Mofford Date Reg. No. 33,740 CERTIFICATE OF TRANSMISSION/MAILING I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below: Signature Typed or printed name Donald F. Mofford

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|     | For FY 2005                                      |

Effective on 12/08/2004.

**Application Number** 10/701,045 Filing Date November 4, 2003 Michael G. Adlerstein First Named Inventor **Examiner Name** Stanley J. Pruchnic Applicant claims small entity status. See 37 CFR 1.27 Art Unit 2859

| TOTAL AMOUNT OF PA   | AYMENT (\$   | \$) 1,73  | 10             | Attorney Dock                    | ttorney Docket No. RTN2-155P |   | :-155PUS                  |  |
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| 1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES SEARCH FEES EXAMINATION FEES Small Entity Small Entity Small Entity  |  |   |                |                                  |                              |   |                           |  |
| Application Type   | Fee (\$)   | Fee (\$)  | Fee (\$)       | Small Entity Fee (\$)            | Fee (\$)                     | Small Entity<br>Fee (\$)                                  | Fees Pa                   | id (\$)                                      |
| Utility  | 300  | 150   | 500            | 250                              | 200                          | 100   |                           |  |
| Design   | 200  | 100   | 100            | 50                               | 130                          | 65  |                           |  |
| Plant  | 200  | 100   | 300            | 150                              | 160                          | 80  |                           |  |
| Reissue  | 300  | 150   | 500            | 250                              | 600                          | 300   |                           |  |
| Provisional  | 200  | 100   | 0              | 0                                | 0                            | 0   |                           |  |
| 2. EXCESS CLAIM FE Fee Description Each claim over 20 or, if Each independent claim Multiple dependent claim Total Claims - 20 or HP = HP = highest number of total Indep. Claims  | for Reissues,<br>n over 3 or, fo<br>ims<br><u>Extra Claims</u><br><b>0</b> | for Reissues, eans see (\$)  x  r, if greater than 20 | ach indepe     | endent claim m<br>Pald (\$)<br>0 | ore than in t                | patent<br>the original pate<br>ependent Claims<br>Fee Pai | Fee (\$) 50 ent 200 360 s | Email Entity<br>Fee (\$)<br>25<br>100<br>180 |
| - 3 or HP = HP = highest number of inde  | 0  | _ x   | = (            | <u>Pald (\$)</u><br>0            |                              | <del></del>   |                           |  |
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| Name (Print/Type) | Donald F. Mofford |  | Date .11-3-05                      |

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